## L22000311361



| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer  |
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Office Use Only



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2024 SEP 25 ATTT: 49 SECTOR AND GETS TATE TALLAHASSEE, FI

## **COVER LETTER**

TO:

**Registration Section** 

Tallahassee, FL 32314

| Division of Co                        | rporations                                   |   |  |  |  |  |
|---------------------------------------|--|---|--|--|--|--|
| SUBJECT: Elite                        | Inspections Name of Lim                      | and Constru   | ction LLC  |  |  |  |
|                                       |  |   |  |  |  |  |
| The enclosed Articles of              | Amendment and fee(s) are sub                 | mitted for filing.  |  |  |  |  |
| Please return all correspond          | ondence concerning this matter               | to the following:   |  |  |  |  |
|                                       | David Co                                     | Name of Person  | τ  |  |  |  |
|                                       | Elite Inspec                                 | tions and Cor   | atruction LLC  |  |  |  |
|                                       | 201 Whispe                                   | address   |  |  |  |  |
|                                       | Sarasota,                                    | FL 34232<br>City/State and Zip Code                                 | <del></del>  |  |  |  |
|                                       | elitainspace<br>E-mail address:              | tions and co @ to be used for future annual report noti             | amail.com  |  |  |  |
| For further information of            | concerning this matter, please ca            | all:  |  |  |  |  |
| David Pape Name of Person             |  | at (727) 317 - 9712  Area Code Daytime Telephone Number             |  |  |  |  |
| Enclosed is a check for t             | he following amount:                         |   |  |  |  |  |
| 团 \$25.00 Filing Fee                  | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) |  |  |  |
| <u>Mailing Addres</u><br>Registration |  | Street Address:<br>Registration Sec                                 | ction  |  |  |  |
| Division of C                         |  | Registration Section Division of Corporations                       |  |  |  |  |
| P.O. Box 632                          |  | The Centre of T   | •  |  |  |  |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## Elite Inspections and Construction Luc (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

| The Articles of Organization for this Limited Lia<br>Florida document number <u>L 2 2000 311</u> |                         | re filed on <u>07</u> | 13/2022                   | and assigned  |  |
|--|-------------------------|-----------------------|---------------------------|---|--|
| This amendment is submitted to amend the follow  | ving:                   |                       |                           |   |  |
| A. If amending name, enter the new name of t   | he limited liability    | y company here:       |                           |   |  |
| The new name must be distinguishable and contain the wor   | ds "Limited Liability ( | Company," the design  | ation "LLC" or the abbi   | reviation "L.L.C."  |  |
| Enter new principal offices address, if applical   | ole:                    |                       |                           | <u></u>   |  |
| (Principal office address MUST BE A STREET   | ADDRESS) _              |                       |                           | 2024 SE   |  |
| Enter new mailing address, if applicable:  |                         | P 25 A                |                           |   |  |
| (Mailing address MAY BE A POST OFFICE B  | <u>(0X)</u>             |                       | (no.                      | 11:<br>11:<br>14:<br>15:<br>14:<br>15:<br>16:<br>17:<br>18:<br>18:<br>18:<br>18:<br>18:<br>18:<br>18:<br>18:<br>18:<br>18 |  |
| B. If amending the registered agent and/or regagent and/or the new registered office address     |                         | ress on our recor     | ds, <u>enter the name</u> | _   |  |
| Name of New Registered Agent:  | David C                 | ameron                | Papt                      |   |  |
| New Registered Office Address:   | 201 Whis                | Pering O              | ars Court                 |   |  |
|  | Sarasot                 | City                  | Florida <u>3</u>          | 4232  |  |
| New Registered Agent's Signature, if changing Re   | gistered Agent:         |                       |                           |   |  |

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>        | Address                | Type of Action |
|--------------|--------------------|------------------------|----------------|
| MGR          | Alyssa D. Frudakis | 201 WNISDERING Daks Lt | □Add           |
|              |                    | Sarajota, FL 3+232     | Remove         |
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|                            | Removing   | any                           | own                           | crship                            | share                | from               | MIYSSa                                | <u>D.</u>    |
|----------------------------|--|-------------------------------|-------------------------------|-----------------------------------|----------------------|--------------------|---------------------------------------|--------------|
|                            | Frudakis   | · ·                           |                               |                                   |                      |                    | ·                                     |              |
| •                          | , , , ,  |                               |                               |                                   |                      | -                  |                                       |              |
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| `an ef<br><del>Vote:</del> | tive date, if other than<br>fective date is listed, the dat<br>If the date inserted in the<br>nent's effective date on t | e must be spe<br>his block do | ecitic and can<br>es not meet | not be prior to<br>the applicable |                      | re than 90 days af |                                       |              |
| record is fi               | rd specifies a delayed effiled.  | fective date.                 | but not an                    | effective time                    | e. at 12:01 a.m. o   | n the eartier of:  | (b) The 90th da                       | y after the  |
| ated                       | Scotembur  | 14                            | <del>·</del>                  | 2024                              | -                    |                    |                                       |              |
|                            |  |                               | - And                         |                                   |                      |                    |                                       |              |
|                            |  |                               |                               | shar as outboris                  | ed representative of | f a member         |                                       | <del></del>  |